



- You must mail a completed *Lead Abatement Project Re-Notification* form twenty-four (24) hours prior to any changes from the original project notification (19 CSR 30-70.630(6), 19 CSR 30-70.640(3)).
- Mail to: Missouri Department of Health and Senior Services, Bureau of Lead Licensing, P.O. Box 570, Jefferson City, MO 65102-0570
- **Please type or print legibly.**

PROJECT ADDRESS (STREET, CITY, STATE, ZIP CODE, COUNTY)

TYPE OF STRUCTURE BEING ABATED (CHECK ALL THAT APPLY)

- ☐ DWELLING (SINGLE-FAMILY) ☐ BRIDGE, OUTDOOR STRUCTURE
☐ DWELLING (MULTI-FAMILY) ☐ COMMERCIAL BUILDING (PLEASE DESCRIBE) _____
☐ CHILD-OCCUPIED FACILITY
 (AS DEFINED IN 701.300(2), RSMo) _____

LEAD ABATMENT PROJECT CONTRACTOR (NAME, ADDRESS, TELEPHONE NUMBER)

PLEASE LIST ANY CHANGES TO THE ORIGINAL PROJECT NOTIFICATION IN THE SPACE BELOW:

This image shows a single sheet of white paper with horizontal blue ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

I hereby certify that all of the information provided in this re-notification is complete and true to the best of my knowledge.

SIGNATURE OF LEAD ABATEMENT SUPERVISOR

DATE _____

SIGNATURE OF LEAD ABATEMENT SUPERVISOR (if more than one)

DATE _____